BLOCK 146 LOT 87 QUALIFICATION CODE _____ ADDRESS (SITE) 414 Texas Road PERMIT NO. 2025240

Marlboro Township
Construction Dept.
1979 Township Drive
Marlboro Township, NJ 07746
732-536-0200 X1800

NEW JERSEY UNIFORM CONSTRUCTION CODE

CONSTRUCTION PERMIT APPLICATION

210581

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 414 Texas Road
2. Name of Owner in Fee: 414 Texas Road LLC
   Tel. 732-794-1500 e-mail grogers@wetlawn.com
   Address 316 Tennent Road Morganville 07751
   street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: 414 Texas LLC. Tel. 732-794-1500
   Address 316 Tennent Road e-mail grogers@wetlawn.com
   Morganville 07751.

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____

5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun _____
   Tel. _____ FAX: _____

V. FEE SUMMARY (for office use only)

		Update	Update
1.	Building	$	
2.	Electrical		
3.	Plumbing		
4.	Fire Protection		
5.	Elevator Devic		
6.	Subtotal		
7.	Less 20% for S		
8.	Subtotal		
9.	State Permit S		
10.	Subtotal		
11.	Cert. of Occup		
12.	Other		
13.	TOTAL		

COMMERCIAL PERMIT

- OK 2 SETS OF PLANS
- OK FREEHOLD SOILS
- OK ZONING
- OK ENGINEERING
- OK ~~MUA~~ WELL
- OK WMUA - SEPTIC
- N/A ELEVATOR
- N/A HEALTH DEPT.
- OKA COAH FORM

VI. BUILDING/SITE (se only)

1.	Number of Sto	
2.	Height of Stru	
3.	Area — Large	
4.	New Building	
5.	Volume of Ne	
6.	Max. Live Loa	
7.	Max. Occupa	
8.	If Industrializ	
9.	Total Land Ar	
10.	Flood Hazarc	
11.	Base Flood Elevation _____ ft.	
12.	Wetlands yes ____ no ____	

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building				8.27.25			10-7-25		
☐ Electrical				8.27.25	10/10/25		10/10/25		
☑ Plumbing				8-27-25		RK	9-23-25		RK
☐ Fire Protection			8-27-25	8-27-25			10-1-25		
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*

1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   - Gained, Sale
   - Gained, Rental
   - Lost, Sale
   - Lost, Rental

B. NON-RESIDENTIAL *(primary use)*

1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____
Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Permit 2025-2440

Issued 10/15/25

4/16/26

2105814B

Marlboro Township
Construction Dept.
1979 Township Drive
Marlboro Township, NJ 07746
732-536-0200 X1800

NEW JERSEY UNIFORM CONSTRUCTION CODE

PERMIT UPDATE

Date Update Issued
Permit # 2025-2440 1B
Date Permit Issued

IDENTIFICATION Block 146 Lot 27 Qualification Code

Work Site Location 414 Texas Rd
Morganville NJ 07751

Owner in Fee 414 Texas Rd. LLC
Address 316 Tennant Rd
Morganville NJ 07751
Tel. (732) 194-1500

Contractor 414 Texas Rd LLC
Address 316 Tennant Rd
Morganville NJ 07751
Tel. (732) 194-1500
Lic. No. or Bldrs. Reg. No.

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:

Demising / Firewalls Interior to create 10 units (including pickleball)

Estimated Cost of Work $ 300,000

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Construction Official

04-16-26
Date

PAYMENTS (Office Use Only)

Building	9500
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
State Permit Surcharge Fee	570
Cert. of Occupancy	
Other	
Total	10,070
Check No.	5032
Cash	
Collected by	RD

U.C.C. F190 (rev. 1/04) 1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE

210558HB Permit update 2025-240 Issued 10/15/25

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE TECHNICAL SECTION

Marlboro Township Construction Dept.
1979 Township Drive, Marlboro Twp., NJ 07746
(732) 536-0200 X-1800

Date Received Control # 4/16/26

Date Issued Permit # 20252440+B

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 146 Lot 27 Qualification Code ____

Work Site Location 414 Texas Rd Morganville NJ 07751

Owner in Fee: 414 Texas Rd LLC

Tel. 732 794-1500 e-mail ____

Address 414 Texas Rd (street) Marlboro (municipality) 07751 (zip code)

Contractor: 414 Texas Rd LLC Tel. ____

Address 316 Tennent Rd Morganville NJ 07751 e-mail grogers@...

Contractor License No. or Builder Registration No. ____ Exp. Date ____

Home Improvement Contractor Registration No. or Exemption Reason ____

Federal Emp. ID No. ____ FAX: ____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] ~~No Plans Required~~		
[✓] All	4/15/26	
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required: [ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT Date: 04-16-26 Approved by: 7

SUBCODE APPROVAL for CERTIFICATE [ ] CO [ ] CCO [ ] CA Date: ____ Approved by: ____

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present ____ Proposed 51.1B

No. of Stories 1

Height of Structure 33 ft.

Area — Largest Floor 50,059 sq. ft.

New Bldg. Area/All Floors ____ sq. ft.

Volume of New Structure 1,401,298 cu. ft.

Max. Live Load 250

Max. Occupancy Load 100

Constr. Class Present ____ Proposed ____

If Industrialized Building: State Approved ____ HUD ____

Est. Cost of Bldg. Work:

1. New Bldg. $ ____
2. Rehabilitation $ ____
3. Total (1+ 2) $ 300,000

U.C.C. F110 (rev. 11/09)

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Sign here: [signature]

Print name here: Gregg Rogers

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

To create 6 units (including pickleball)

Interior Demising Fire Walls

836 Liner ft

-Pending Pickleball update

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [X] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence ____ Height (exceeds 6')
- [ ] Sign ____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall ____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [✓] Other Demising/Fire Wall 836 liner
- [ ] Demolition

FEE (Office Use Only)

$ 9500 (incl. in above)

Administrative Surcharge $ ____

Minimum Fee $ ____

State Permit Surcharge Fee $ 570

TOTAL FEE $ 10,070

Marlboro Township
Construction Dept.
1979 Township Drive
Marlboro Township, NJ 07746
732–536–0200 X1800

PERMIT UPDATE

216581 +A

Date Update Issued 3/11/26
Permit #
Date Permit Issued 20252440+A

IDENTIFICATION Block 146 Lot 27 Qualification Code

Work Site Location 414 TEXAS RD MORGANVILLE 07751

Owner in Fee 414 TEXAS LLC

Address 316 TENNENT RD MORGANVILLE

Tel. (732 794 1500

Contractor PDZ ELECTRIC, INC

Address 228 PIERSON AVE. UNIT B EDISON, NJ 08837

Tel. (732) 744-9350

Lic. No. or Bldrs. Reg. No. 14377

Is hereby granted permission to perform the following work:

[ ] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[✓] ELECTRICAL [✓] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:

C of C ELEC + FIRE

Estimated Cost of Work $

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Construction Official

03-11-26
Date

PAYMENTS (Office Use Only)

Building	
Electrical	80
Plumbing	
Fire Protection	80
Elevator Devices	
Other	
State Permit Surcharge Fee	
Cert. of Occupancy	
Other	
Total	160
Check No.	
Cash	
Collected by	

U.C.C. F190 (rev. 1/04)

1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS

Marlboro Township
Construction Dept.
1979 Township Drive, Marlboro Twp., NJ 07746
(732) 536-0200 X-1800

210581+A

Date Received 3/11/26
Control #
Date Issued
Permit # 20252440+A

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 140 Lot 27 Qualification Code

Work Site Location 414 TEXAS RD. MORGANVILLE, NJ 07751

Owner in Fee: 414 TEXAS RD. LLC.

Tel. 732 7941500 e-mail grogers@wetlawn.com

Address 316 TENNENT RD. MORGANVILLE, NJ 07751
street municipality zip code

Contractor: PDZ ELECTRIC, INC Tel (732) 744-9550

Address 228 PIERSON AVE. UNIT B e-mail adomporapdzelectric.com
EDISON, NJ 08837

Contractor License No. 14377 Exp. Date 03-31-27

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-3231523 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as FLEX BLDG - Utility Co. JCP&L

Est. Cost of Elec. Work $

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: AUGUSTINE DOMPOR

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: FLEX WAREHOUSE WIRING

QTY.	SIZE	ITEMS	FEE (Office Use Only)
152		Lighting Fixtures	
1		Receptacles	
		Switches	
		Detectors	
15		Light Poles	
		Motors—Fract. HP	
16		Emergency & Exit Lights	
1		Communications Points	
1		Alarm Devices/F.A.C. Panel	
185		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
X		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
1		KW Dishwasher	80
1		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
8	9/KW	~~HP Motors 1/+ HP~~ EV charger	
1	1600	KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
12		GAS HEATERS	
1	100A	SUBPANEL	Administrative Surcharge $
1	225A	SUBPANEL	Minimum Fee $
			State Permit Surcharge Fee $
1	200A	SUBPANEL	TOTAL FEE $ 80

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 03-04-26

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Marlboro Township
Construction Dept.
1979 Township Drive, Marlboro Twp., NJ 07746
(732) 536-0200 X-1800 21058+A

Date Received 3/11/26
Control #
Date Issued
Permit # 7025244O+A

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 140 Lot 37 Qualification Code

Work Site Location 414 TEXAS RD. MORGANVILLE, NJ 07751

Owner in Fee: 414 TEXAS RD LLC

Tel (732) 794 1500 e-mail grogers@wetlawn.com

Address 316 TENNENT RD, MORGANVILLE, NJ 07751

Contractor: PDZ ELECTRIC, INC. (Municipality) Tel (732)744-9550

Address 228 PIERSON AVE. UNIT B EDISON, NJ 08837 e-mail adompor@pdzelectric.com

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 14377 Exp. Date 03-31-27

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-3235523 FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 25000.-

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [X] Existing
Location of Main Control Valve:

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant/Contractor sign here:

Print name here: AUGUSTINE DOMPOR

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: INSTALL LOW VOLTAGE FIRE ALARM

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[X] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	33	
Supervisory Devices (i.e., tampers, low/high air)	2	
Signaling Devices (i.e., horn/strobes, bells)	23	
Other Devices PANEL	1	
TOTAL	59	
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other DFC		80
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		
TOTAL FEE $		80

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
[ ] Partial -Undersiab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 3-10-26
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

210581

Marlboro Township
Construction Dept.
1979 Township Drive
Marlboro Township, NJ 07746
732–536–0200 X1800

PERMIT UPDATE

Date Update Issued
Permit # 20052440
Date Permit Issued 10/15/25

IDENTIFICATION Block 1416 Lot 27 Qualification Code

Work Site Location 414 Texas Road Morganville, NJ 07751

Owner in Fee 414 Texas Road

Address 316 Tennent Road Morganville 07751

Tel. (732) 794-1500.

Contractor

Address 316 Tennent Road Morganville 07751

Tel. (732) 794-1500.

Lic. No. or Bldrs. Reg. No.

Is hereby granted permission to perform the following work:

[ ] BUILDING	[ ] PLUMBING	[ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL	[ ] FIRE PROTECTION	[ ] DEMOLITION
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[ ] OTHER

DESCRIPTION OF WORK: Frey Warehouse Bldg with approximately 8 Tenants and 11 light poles S-1/B Use and Fire Alarm

Estimated Cost of Work $ 2,400,000

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Construction Official

Date 10-15-25

PAYMENTS (Office Use Only)

Building	39649
Electrical	100+3505=3605
Plumbing	2535
Fire Protection	2265+111=2376
Elevator Devices	
Other	
State Permit Surcharge Fee	4056
Cert. of Occupancy	6923
Other	
Tc	59172
Check No.	# 20649
Cash	
Collected by	KE 10/15/25

U.C.C. F190 (rev. 1/04)

1 WHITE—INSPECTOR 2 CANARY—OFFICE 3 PINK—OFFICE 4 GOLD—APPLICANT

BUILDING SUBCODE
TECHNICAL SECTION

Marlboro Township
Construction Dept.
1979 Township Drive, Marlboro Twp., NJ 07746
(732) 536-0200 X-1800

210581

Date Received
Control #

Date Issued 10/15/25
Permit # 20252440

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 1416 Lot 27 Qualification Code
Work Site Location 414 Texas Road Morganville, 07751

Owner in Fee: 414 Texas Road LLC
Tel. 732-794-1500 e-mail grogers@wetlawn.com
Address 316 Tennent Road Morganville 07751
street municipality zip code
Contractor: 414 Texas Rd LLC Tel. 732-794-1500
Address 316 Tennent Road e-mail grogers@wetlawn.com
Morganville 07751

Contractor License No. or Builder Registration No. Exp. Date
Home Improvement Contractor Registration No. or Exemption Reason
Federal Emp. ID No. FAX:

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Sign here:
Print name here: Greg Rogers

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Flex Warehouse Bldgs. (Approx 8 Tenants) septic

11 light poles

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[✓] All	10-15-25	
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

Joint Plan Review Required:
[✓] Elec. [✓] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 10-15-25
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Proposed S1 / B **Constr. Class** Present Proposed 2B

No. of Stories 1
Height of Structure 33 ft.
Area — Largest Floor 50,079 sq. ft.
New Bldg. Area/All Floors sq. ft.
X Volume of New Structure 2,001,298 cu. ft.
X Max. Live Load 250
X Max. Occupancy Load 100

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:
1. New Bldg. $ 2,400,000
2. Rehabilitation $
3. Total (1+ 2) $ 0

TYPE OF WORK:
[✓] New Building
[ ] Addition
[ ] Rehabilitation
[ ] Roofing
[ ] Siding
[ ] Fence Height (exceeds 6')
[ ] Sign Sq. Ft.
[ ] Pool
[ ] Retaining Wall Sq. Ft.
[ ] Asbestos Abatement Subchapter 8
[ ] Lead Haz. Abatement NJAC 5:17
[ ] Radon Remediation
[ ] Other
[ ] Demolition

FEE (Office Use Only)
$ 39,647

Administrative Surcharge $ 4086
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $ 43733

ELECTRICAL SUBCODE
TECHNICAL SECTION

210581

Date Received
Control #
Date Issued 10/15/25
Permit # 2025-2440

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 146 Lot 27 Qualification Code

Work Site Location 414 Texas Rd
Marlboro NJ

Owner in Fee: 414 Texas Road LLC

Tel. 732 794 1500 e-mail groger5@optimum.com

Address 716 Rennert Ave Morganville NJ 07751
street municipality zip code

Contractor: Electro Watchman Alarm Tel. (732) 972-1100

Address 39 Shiling Rd e-mail
Manalapan NJ 07726

Contractor License No. 34BF00020200 Exp. Date 01/17/2026

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 112234255 FAX: (732) 972-8668

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[✓] Electric Plans ~~Approved~~
Date: 10/15/25 Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [✓] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10/15/25
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Larry Cohen

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Fire Alarm

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
65		Alarm Devices/F.A.C. Panel	100
65		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $
Minimum Fee $ 100
State Permit Surcharge Fee $
TOTAL FEE $

U.C.C. F120 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Marlboro Township
Construction Dept.
1979 Township Drive, Marlboro Twp., NJ 07746
(732) 536-0200 X-1800

210581

Date Received
Control #
Date Issued 10/15/25
Permit # 20252440

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 146 Lot 27 Qualification Code

Work Site Location 414 Texas Road Morganville 07751

Owner in Fee: 414 Texas Road LLC

Tel. 732 794-1500 e-mail grogers@wetlawn.com

Address 316 Tennent Road Morganville 07751

Contractor: Corbin Electric Services (street / municipality / zip code) Tel. 732 536-0444

Address 35 Vanderburg Road. e-mail info@corbinelectric.com
Marlboro, NJ 07746.

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-3121404 FAX: 732 536-8547

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 251,946

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Steven Corbin

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Flex warehouse Building Shell is light poles

QTY.	SIZE	ITEMS	FEE (Office Use Only)
52		Lighting Fixtures	
1		Receptacles	
		Switches	
		Detectors	
15		Light Poles	
		Motors—Fract. HP	
16		Emergency & Exit Lights	
		Communications Points	
1		Alarm Devices/F.A.C. Panel	180
0		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
8	50A	HP Motors 1/+ HP EV CHARGERS	840
		KW Transformer/Generator	
1	1600	AMP Service	725
3		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	960
12		Gas Heaters	300
1	225	Subpanel	
1	100	" "	
1	200	" "	

Administrative Surcharge	$ 106
Minimum Fee	$ 200
State Permit Surcharge Fee	$
TOTAL FEE	$ 3805

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Electric Plans Approved
Date: 10/15/25 Approved by:
Joint Plan Review Required:
[✓] Bldg. [✓] Plumb. [✓] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 10/15/25
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

U.C.C. F120 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

PLUMBING SUBCODE
TECHNICAL SECTION

Marlboro Township Construction Dept
1979 Township Drive, Marlboro Twp, NJ 07746
(732) 536-0200 X-1800

Date Received
Control # 210587
Date Issued 10/15/25
Permit # 20252440

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 146 Lot 27 Qualification Code

Work Site Location 414 Texas Road Morganville 07751

Owner in Fee: 414 Texas Road LLC

Tel. 732 794-1500 e-mail grogers@wetlawn.com

Address 314 Tennent Road (street) Morganville (municipality) 07751 (zip code)

Contractor: BSG PLUMBING LLC Tel. 732 899-6695

Address 11 FLAMINGO DR e-mail bsgplumbingandheating@gmail.com
Howell NJ 07731

Contractor License No. 9287 Exp. Date 6.27

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size 4" Public Sewer Private Septic

Water Service Size 1½" Public Water Private Well

Est. Cost of Plumbing Work $ 50,000

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: BRIAN SCOTT GILBERT [X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: UNDERSLAB WORK / SKETCH PERMIT (Flex Warehouse)

QTY	FIXTURE/EQUIPMENT	FEE (Office Use Only)
16	Water Closet	$ 320
	Urinal/Bidet	
	Bath Tub	
16	Lavatory	320
	Shower	
	Floor Drain	
16	Sink	320
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
12	Gas Piping	240
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
2	Backflow Preventer	150
	Greasetrap	
1	Sewer Connection	106
1	Water Service Connection	125
	Stacks	
12	Other Gas Heaters	960

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Plumbing Plans Approved
Date: 10/22 Approved by: RK
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10/22/25
Approved by: R. Keller

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final				

Administrative Surcharge	$
Minimum Fee	$ 2535
State Permit Surcharge Fee	$
TOTAL FEE	

U.C.C. F130 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

210581

Date Received
Control #
Date Issued 10/15/25
Permit # 20252440

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 146 Lot 27 Qualification Code ______

Work Site Location 414 Texas Rd
Marlboro NJ

Owner in Fee: 414 Texas Road LLC

Tel. 732 749 1500 e-mail [illegible] @ [illegible]

Address 916 [illegible] Road [illegible] NJ 07747 [illegible]
(street) (municipality) (zip code)

Contractor: Electro Watchman Alarm Inc Tel. (732) 972-1100

Address 39 Shilling Rd e-mail larry@ewasecurity.com

Manalapan NJ 07726

Fire Protection Equipment, NJ Div of Fire Safety Permit No. ______

Fire Protection Equipment, NJ Div of Fire Safety Installer No. ______

Fire Alarm Contractor No. 34BF00020200 Exp. Date 01/30/2026

Home Improvement Contractor Registration No. or Exemption Reason ______

Federal Emp. ID No. 112234255 FAX: (732) 972-8668

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ______ Proposed ______

Constr. Class: Present ______ Proposed ______

Heating System: [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other ______

Location: ______

Fuel Storage Tank:
Fuel Type: [ ] Flammable *OR* [ ] Combustible
Capacity ______

Fire Alarm System: [X] New *OR* [ ] Existing

Location of Panel: Electrical Room

Fire Suppression/Standpipe System:
[ ] New *OR* [X] Existing

Location of Main Control Valve: ______

Total Cost of Fire Protection Work $ 25,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: ______ Approved by: ______
[ ] Fire Protection Plans Approved
Date: ______ Approved by: ______
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 10-1-25
Approved by: [signature]
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: ______
Approved by: ______

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

Dates (Month/Day)

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant/Contractor sign here: [signature]

Print name here: Larry Cohen

[X] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Fire Alarm
Water Supply Source Install Low voltage alarm
Method of Alarm/Suppression System Supervision ______

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		$
Alarm Systems		
[X] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	33	111
Supervisory Devices (i.e., tampers, low/high air)	2	
Signaling Devices (i.e., horn/strobes, bells)	23	
Other Devices Panel	1	
TOTAL	59	
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other ______		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other ______		

Administrative Surcharge $ ______
Minimum Fee $ ______
State Permit Surcharge Fee $ ______
TOTAL FEE $ 111

U.C.C. F140 (rev. 02/11) Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Marlboro Township
Construction Dept.
1979 Township Drive, Marlboro Twp., NJ 07746
(732) 536-0200 X-1800

Date Received
Control # 210581
Date Issued 10/15/25
Permit # 2025-2440

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 146 Lot 27 Qualification Code

Work Site Location 414 Texas Road
Morganville 07751

Owner in Fee: 414 Texas Road LLC

Tel. 732 492-4710 e-mail grogers@aol.com

Address 316 Tennent Road Morganville 07751

Contractor: K&S Fire Protection (street, municipality) Tel. (732) 503-2195 (zip code)

Address 14 Plaza Nine e-mail akay@ekefire.com
Manalapan, NJ 07726

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 19546

Fire Protection Equipment, NJ Div of Fire Safety Installer No. 19446

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 150,000

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[X] New OR [ ] Existing
Location of Main Control Valve: FDC/S Rm

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant/Contractor sign here:

Print name here: Ed Kay

D. TECHNICAL SITE DATA [X] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK: New Warehouse Sprinklered
Water Supply Source New 6" U.G.
Method of Alarm/Suppression System Supervision Tamper Switch

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks	—	
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	1	75
Supervisory Devices (i.e., tampers, low/high air)	2	
Signaling Devices (i.e., horn/strobes, bells)	1	
Other Devices ~~Exit~~ / Exits	16	
TOTAL	4	
Suppression Systems		
Fire Pump ____ GPM Type ____	—	
Dry Pipe/Alarm Valves	—	
Pre-action Valves	—	
Sprinkler Heads (Dry and Wet)	62	2190
Standpipes	2	
Pre-engineered Systems		
Wet Chemical	—	
Dry Chemical	—	
CO_2 Suppression	—	
Foam Suppression	—	
FM200 Suppression	—	
Other	—	
Other Systems		
Kitchen Hood Exhaust System	—	
Smoke Control System	—	
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	—	
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		2265
State Permit Surcharge Fee $		
TOTAL FEE $		

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by: 10-15-25

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

U.C.C. F140 (rev. 02/11) Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is, an owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

( ) Check if contractor.

Agent Name Greg Rogers 454 Metro Road LLC

Address 316 Pennent Road
Manalapan NJ 07751

Telephone 732 794 1500

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.